

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25	1					
26						
27						
28						
29						
30						
31	1					
32						
33						
34						
35						
36						
37	1					
38						
39						
40						
41						
42						
43	1					
44						
45						
46						
47						
48						
49	1					
50						
TOTAL IND.	3					
TOTAL DEP.						
TOTAL CLAIMS	3					

	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
54						
55	1					
56						
57						
58						
59						
60						
61	1					
62						
63						
64						
65						
66						
67	1					
68						
69						
70						
71	1					
72						
73						
74						
75	1					
76						
77						
78						
79	1					
80						
81						
82						
83						
84						
85	1					
86						
87						
88						
89						
90						
91	1					
92						
93						
94						
95						
96						
97	1					
98						
99						
100						
TOTAL IND.	5					
TOTAL DEP.						
TOTAL CLAIMS	5					

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FEE CALCULATION SHEET**

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FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT									
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	
1							51							
2							52							
3							53							
4							54							
5							55							
6							56							
7							57							
8							58							
9							59							
10							60							
11							61							
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14							64							
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27							77							
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30							80							
31							81							
32							82							
33							83							
34							84							
35							85							
36							86							
37							87							
38							88							
39							89							
40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	20						TOTAL IND.							
TOTAL DEP.	88						TOTAL DEP.							
TOTAL CLAIMS	108						TOTAL CLAIMS							